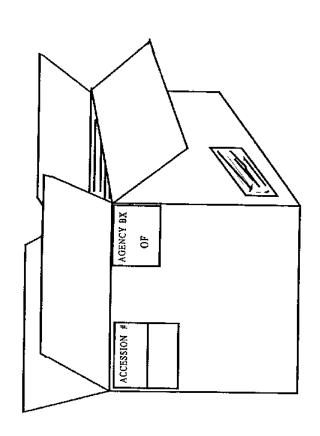
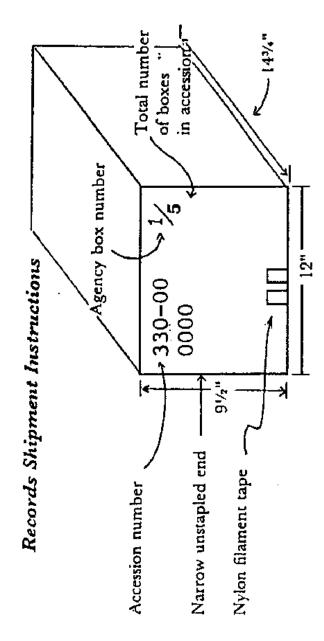
⋖ ADDENDUM CHAPTER 2

### **FIGURES**

MARKING AND PACKING INSTRUCTIONS FIGURE 2-A-1





### FIGURE 2-A-2 RECORDS TRANSMITTAL AND RECEIPT, SF FORM 135

		RECO	RDS TRANS	MITTAL AND REC	CEIPT	Complete and send shipment of records.	original and two o	opies of ructions of	this form to the appropriate Federal lon reverse.	Records Center for a	approval prior to	PAGE 1	OF	PAGE
ТО	(0	Complete the	e address for t		serving your area as shown in 36	CFR 1228.150.)	5. FROM		er the name and complete mailing address address.)	of the office retiring red	cords. The signed receipt of the	nis form will be	sent to	
				Federal Record	s Center									
AGENCY TRANSFE AUTHOR- IZATION	ĒR	TRANSFERR	ING AGENCY	/ OFFICIAL (Signat	ure and title)	DATE								
AGENCY CONTACT		TRANSFERR	ING AGENCY	/ LIAISON OFFICI	AL (Name, office and telephone No.)									
RECORDS CENTER RECEIPT		RECORDS R	ECEIVED BY	(Signature and title)		DATE							Fol	ld Line
						RE	CORDS DATA							
ACCESSIO	ON N	IUMBER	VOLUME	AGENCY	SERIES D	DESCRIPTION		-RIC-	DISPOSAL AUTHORITY	DISPOSAL	COMPLETED BY	RECORDS (	ENTE	<u>:</u> R
RG F	Υ	NUMBER	(cu. ft.)	BOX NUMBERS	(With inclusive	e dates of records)		RESTRIC- TION	(Schedule and Item number)	DATE	LOCATION	SHELF	CONT	AUTO.
(a) (b	b)	(c)	(d)	(e)		(f)		(g)	(h)	(i)	(i)	(k)	(1)	(n
330								W						

36 CFR 1228-152 (PerFORM PRO)

TRICARE OPERATIONS MANUAL 6010.51-M, AUGUST 1, 2002
CHAPTER 2, ADDENDUM A
FIGURES

**FIGURES** 

### FIGURE 2-A-2 RECORDS TRANSMITTAL AND RECEIPT, SF FORM 135 (CONTINUED)

### **INSTRUCTION FOR COMPLETION OF STANDARD FORM 135**

### FOR COMPLETION BY THE TRANSFERRING AGENCY

Items 1, 2, 3 and 5 are self-explanatory. Specific instructions for item 6 are as follows:

Col.

 $\omega$ 

Accession Number. A separate accession number is required for each series of records listed on the form. A series consists of records having the same disposal authority and disposal date that are transferred together to the records center. The accession number is entered in three parts, consisting of:

- (a) The NARA record group number assigned to the records of the agency making the transfer;
- (b) The last two digits of the current fiscal year; and
- (c) The four digit sequential number obtained in advance from the records center. (Arrangements may be made with the center to have these numbers assigned by the agency records officer or other official.)
- (d) Volume. Enter the volume in cubic feet of each series of records being transferred.
- (e) Agency Box Numbers. Show the inclusive box numbers for each series of records being transferred. The agency shall number each carton sequentially as follows: 1 of 25, 2 of 25, 3 of 25, etc. (Each new series of records should begin with carton number 1.) to facilitate control of the records and future reference service, the agency also shall mark each container with the assigned accession number prior to shipment.
- (f) Series Description. Describe the records insufficient detail to allow the records center to check for proper application of the disposal schedule. Inclusive dates of the records should be indicated. Show the organizational component that created the records when it is other than that shown in item 5.
- (g) Restriction. Enter one of the following codes to show a restriction on use of the records. Restrictions other than (or in addition to) security classifications, such as limiting access certain agency officials, are to be specified by a statement in the Series Description column (f).

Code	Restrictions
Q	Q security classification
T	Top Secret security classification
S	Secret security classification
C	Confidential security classification
R	Restricted usewitnessed disposal not required
	(specify in column (f))
W	Restricted usewitnessed disposal required
	(specify in column (f))
N	No restrictions

- (h) Disposal Authority. For each series of records, cite the agency schedule and specific item number authorizing disposal. Cite the NARA disposal job and item number if it has not been incorporated into an updated agency schedule.
- (i) Disposal Date. Applying the disposal authority previously cited in column (h), enter the month and year in which the records may be destroyed.

### FOR COMPLETION BY THE RECORDS CENTER

Item 4 is self-explanatory. Specific instructions for item 6 are as follows:

Col.

- (j) Location. The records center annotates the shelf location of the first carton for each series of records.
- (*k*) *Shelving Plan*. The records center enters the appropriate code from Chap. 7-10e, HB, Records Center Operations (NAR P 1864.1A), to reflect the shelving system.
- (1) Container Type. The records center enters the appropriate code from Chap. 7-10h, NAR P 1864.1A, to reflect the type of container in which the records are retired.
- (m) Automatic Disposal. The records center enters either Y (yes) to indicate automatic disposal applies or N (no) indicating that the agency wishes to receive disposal concurrence notice prior to destruction of the records. Automatic disposal is applied only when previously agreed upon by the agency.

Use Standard From 135-A, Records Transmittal and Receipt Continuation, when additional space is required for listing records data.

Standard Form 135 Back (Rev. 7-85)

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FIGURE 2-A-3 RECORDS TRANSMITTAL AND RECEIPT (CONTINUATION), SF FORM 135A

	TR/ AN	ECORDS ANSMITTAL D RECEIPt Intinuation		This form is Data when adequate. In 135 apply.	to continue listing of Records space on SF 135 is not astructions for completion of SF	TRANSFERRING AGENCY	S NAN	IE	DATE		PAGE		OF P	AGES
ACCES	SSION	NUMBER	VOLUME	AGENCY	SERIES DESCRIF	DTION	္ခ်	DICDOCAL ALITHODITY	DISPOSAL	COMPLETED	BY RECOR	RDS CE	NTER	
RG	FY	NUMBER	(cu. ft.)	BOX NUMBERS	(With inclusive dates of	records)	RESTRIC- TION	DISPOSAL AUTHORITY (Schedule and Item number)	DATE	LOCATION	١	SHELF PLAN	CONT. TYPE	AUTO. DISP.
(a)	(b)	(c)	(d)	(e)	(f)		(g)	(h)	(i)	(i)		(k)	(I)	(m)
NCN 7547										STANDARD FORM				

NSN 7540-00-823-7952 Previous edition usable STANDARD FORM 135-A (Rev. 7-85) Prescribed by NARA 36 CFR 1228-152 TRICARE OPERATIONS MANUAL 6010.51-M, AUGUST 1, 2002
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hapter 2, Addendum Figures

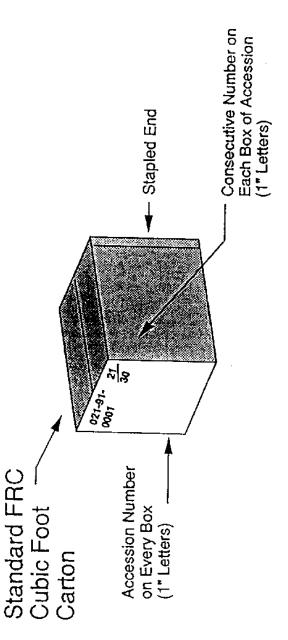
### REFERENCE REQUEST - FEDERAL RECORDS CENTER, OF FORM 11 FIGURE 2-A-4

REFERENCE REQUEST-FEDERAL RECORDS CENTER	NOTE: Use a separate form for each request.	each request.
SECTION I-TO BE COMPLE		
ACCESSION NO. AGENCY BOX NUMBER	BER RECORDS CENTER LOCATION NUMBER	NUMBER
OF		
DESCRIPTION OF RECORD(S) OR INFORMATION REQUESTED		
ВОХ		
FOLDER (include file number and title)		
REMARKS		
NATURE OF SERVICE FURNISH COPY OF PERMANENT TEMPORARY RECORDS MITHDRAWAL LOAN OF RECORD(S) RI	DOTHER (Specify)	
SECTION II-FOR USE BY RECORDS		
RECORDS NOT IN CENTER CUSTODY RECORDS DESTROYED		
E REC		
WRONG BOX NUMBER-PLEASE RECHECK		
WRONG CENTER LOCATION-PLEASE RECHECK		
ADDITIONAL INFORMATION REQUIRED TO IDENTIFY RECORDS REQUESTED		
MISSING (Neither record(s), information nor charge card found in container(s) specified)		
RECORDS PREVIOUSLY CHARGED OUT TO (Name, agency and date):		
DATE	SERVICE REQUIRED	SEARCHER'S INITIALS
SECTION III-TO BE COMPLETED BY REQUESTING AGENCY	ING AGENCY	
NAME OF REQUESTER TELEPHONE NO. TELEPHONE NO.		
	RECEIPT OF RECORDS	
NAME AND ADDRESS OF AGENCY (Include street	Requester please sign, date and return this form, for file item(s) listed above, ONLY if the block to right has been checked by the Records Center	for thas
address, building,	SIGNATURE	DATE
room no. and ZIP code		<u>.</u>
NSN 7540-00-682-6423 5011-108		OPTIONAL FORM 11 (Rev. 7-87) NATIONAL ARCHIVES AND RECORDS ADMINISTRATION 36 CFR 1228.162

# TRICARE OPERATIONS MANUAL 6010.51-M, AUGUST 1, 2002 CHAPTER 2, ADDENDUM A

FIGURES

FIGURE 2-A-5 ARRANGEMENT OF BOXES ON PALLETS



Palletizing Your Records Alternate Each Layer (Maximum - 6' High)

